



TRANSMITTAL FORM

Attorney Docket No.

P199CIP/1595CIP

2615

In re: Application John D. BERNSTEIN, et al.

Confirmation No: 4935

Serial No: 09/585,891

Group Art Unit: 2615

Filed: May 31, 2000

Examiner: Long, Heather R.

For: METHOD AND SYSTEM FOR AUTOMATICALLY CONFIGURING A HAND-HELD CAMERA
USING WIRELESS COMMUNICATION TO IMPROVE IMAGE QUALITY

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	Form 1449	<input checked="" type="checkbox"/>	1 Sheet Amended Drawings (Figure 12)	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below)
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	RECEIVED MAY 04 2004 Technology Center 2600	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxxx month(s), from to .			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	52	52	0	\$18.00	\$ 0.00
Independent Claims	6	6	0	\$86.00	\$ 0.00
Total Fees					\$ 0.00

METHOD OF PAYMENT

<input type="checkbox"/>	Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.
<input checked="" type="checkbox"/>	Charge any fees or credit any overpayment to Deposit Account No. 02-2120 (Sawyer Law Group LLP)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	April 26, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: April 26, 2004	
Type or printed name	Jackie Tanda
Signature	



CERTIFICATE OF MAIL

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on April 26, 2004.

Jackie Tanda
Jackie Tanda

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: April 26, 2004

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

MAY 04 2004

Technology Center 2600

AMENDMENT

Sir:

In response to the Office Action dated January 26, 2004, please amend the above-identified application in the following manner:

Amendments to the Drawings begin on page 2 of this paper and include one annotated sheet.

Amendments to the Specification begin on page 3 of this paper.

Amendments to the Claims are reflected in the listing of claims, which begins on page 5 of this paper.

Remarks/Arguments begin on page 16 of this paper.